

10/523706

PTO/SB/01 (08/23)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted With Initial
Filing

OR

☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number EX03-059C-US

First Named Inventor Tai, et al.

COMPLETE IF KNOWN

Application Number 10/523,706 ✓

Filing Date February 4, 2005

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PSMCs AS MODIFIERS OF THE RB PATHWAY AND METHODS OF USE

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

08/06/2003 ✓

as United States Application Number or PCT International

Application Number

PCT/US03/24561 ✓

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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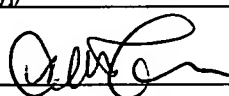
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DECLARATION — Utility or Design Patent Application

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Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
1-00 <u>Albert K.</u>			<u>Tai</u>		
Inventor's Signature				Date	
				<u>March 3, 2005</u>	
Residence: City		State	Country	Citizenship	
<u>San Francisco</u> CA		CA	US	US ✓	
Mailing Address					
27 Nordhoff Street					
City		State	Zip	Country	
San Francisco		CA	94131	US	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
<u>Chunyan</u>			<u>Song</u>		
Inventor's Signature				Date	
Residence: City		State	Country	Citizenship	
San Francisco		CA	US	CN	
Mailing Address					
95 Behr Avenue, #103					
City		State	Zip	Country	
San Francisco		CA	94131	US	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 2 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

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Address			
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Country		ZIP	
Telephone		Fax	
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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>Albert K.</u> (first and middle [if any])		Family Name <u>Tai</u> or Surname	
Inventor's Signature		Date	
Residence: City <u>San Francisco</u>	State <u>CA</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>27 Nordhoff Street</u>			
City <u>San Francisco</u>	State <u>CA</u>	Zip <u>94131</u>	Country <u>US</u>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>Chunyan</u> (first and middle [if any])		Family Name <u>Song</u> or Surname	
Inventor's Signature <u>Chunyan Song</u>		Date <u>02/28/05</u>	
Residence: City <u>Foster City</u>	State <u>CA</u>	Country <u>US</u>	Citizenship <u>CN</u> ✓
Mailing Address <u>918 Beach Park Boulevard, #54</u>			
City <u>Foster City</u>	State <u>CA</u>	Zip <u>94404</u>	Country <u>US</u>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>2</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
Page 1 of 2	

Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Michael Martin				Ollmann	
Inventor's Signature <i>Michael Martin Ollmann</i>				Date 1/24/05	
Residence: City Redwood City		State CA		Country US	
Mailing Address 8 Odessa Court		Citizenship US ✓			
Mailing Address					
City Redwood City		State CA		ZIP 94063	
				Country US	
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Lucile A.				Gillett	
Inventor's Signature				Date	
Residence: City Gardnerville		State NV		Country US	
Mailing Address 640 Rocking Horse Court		Citizenship US			
Mailing Address					
City Gardnerville		State NV		Zip 89410	
				Country US	
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Joanne I.				Adamkewicz	
Inventor's Signature				Date	
Residence: City San Francisco		State CA		Country US	
Mailing Address 1249 Rhode Island Street		Citizenship US			
Mailing Address					
City San Francisco		State CA		Zip 94107	
				Country US	

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PTO/SB/02A (08-03)

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

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Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Michael Martin			Ollmann		
Inventor's Signature				Date	
Residence: City	Redwood City	State	CA	Country	US
Citizenship US					
Mailing Address 8 Odessa Court					
Mailing Address					
City	Redwood City	State	CA	ZIP	94063
				Country	US
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Lucile A.			Gillett		
Inventor's Signature <i>Lucile A. Gillett</i>				Date 1/20/05	
Residence: City	Gardnerville	State	NV	Country	US
Citizenship US					
Mailing Address 640 Rocking Horse Court					
Mailing Address					
City	Gardnerville	State	NV	Zip	89410
				Country	US
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))			Family Name or Surname		
Joanne I.			Adamkewicz		
Inventor's Signature				Date	
Residence: City	San Francisco	State	CA	Country	US
Citizenship US					
Mailing Address 1249 Rhode Island Street					
Mailing Address					
City	San Francisco	State	CA	Zip	94107
				Country	US

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PTO/SF/02-008-3)
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Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Michael Martin		Ollmann	
Inventor's Signature		Date	
Residence: City	Redwood City	State	CA
Country	US	Citizenship	US
Mailing Address 8 Odessa Court			
Mailing Address			
City	Redwood City	State	CA
ZIP	94063	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lucile A.		Gillett	
Inventor's Signature		Date	
Residence: City	Gardnerville	State	NV
Country	US	Citizenship	US
Mailing Address 640 Rocking Horse Court			
Mailing Address			
City	Gardnerville	State	NV
Zip	89410	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Joanne I.		Adamkewicz	
Inventor's Signature <i>Joanne I. Adamkewicz</i>		Date 20 Jan 2005	
Residence: City	San Francisco	State	CA
Country	US	Citizenship	US
Mailing Address 1249 Rhode Island Street			
Mailing Address			
City	San Francisco	State	CA
Zip	94107	Country	US

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Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])				Family Name or Surname	
Kim				Lickteig	
Inventor's Signature					Date 2/9/05
Residence: City	San Francisco	State	CA	Country	US
Citizenship US					
Mailing Address 1921 Grove Street					
Mailing Address					
City	San Francisco	State	CA	ZIP	94117
				Country	US
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])				Family Name or Surname	
Inventor's Signature					Date
Residence: City		State		Country	
Citizenship					
Mailing Address					
Mailing Address					
City		State		Zip	
				Country	
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature					Date
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Citizenship					
Mailing Address					
Mailing Address					
City		State		Zip	
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